



PURCHASE REQUISITION

Bill To:		Requisition Number:	
		Requisition Date:	
Delivery Address: (All bids must be FOB destination shown)		Primary NIGP Code:	
		Special Instructions:	Agency Contract: <input type="checkbox"/> Yes <input type="checkbox"/> No

Explanation:
<p>This Requisition is for:</p> <p><input type="checkbox"/> Open Agency Contract</p> <p><input type="checkbox"/> Fixed Agency Contract</p> <p><input type="checkbox"/> Open Market</p> <p><input type="checkbox"/> Construction</p>
Attachments:
See attached _____ page(s) or _____ line item(s) and attached specifications _____ pages

Contract Replacement

If the Requisition is to replace a current Agency Contract, provide the following:			
Current Vendor Name:			
Current Contract Number:		Expiration Date:	
Delivery Requested:		Purchasing Agent:	
Buyer Code:		Phone:	

Supplier

Suggested Supplier:			
Vendor TIN:		Minority:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Validated Not to Exceed:	\$	Cost Center/Expense Code:	

Signatures

Agency Procurement Officer Authorization:	Date:
Division Personnel Authorization:	Date: